## PATENT APPLICATION FEE DETERMINATION RECORD

\* X

Effective January 1, 2003

Application or Docket Number

10624675

								1000101					
		CLAIMS AS	S FILED - PART I					SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)			TYPE [		OR	SMALL ENTITY		
			37			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			## minus 20= *		· \$2	-1		X\$ 9=		OR	X\$18=	257	
INDEPENDENT CLAIMS			6 minus 3 = 3			>		X42=		OR	X84=	75)	
ML	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				İ			1		ريح	
* If the difference in column 1 is less than zero, enter "0" in column 2							' [	+140=		OR	+280=		
ii uie uiiieience iii columii i is iess than zero, enter "U" in column 2								TOTAL		OR	TOTAL	1254	
CLAIMS AS AMENDED - PART II											OTHER		
1	-2303	(Column 1) CLAIMS		(Colur		(Column 3)		SMALLE	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 34	Minus	** -	34	- O		X\$ 9=		OR	X\$18=		
	Independent	* (e NTATION OF MI	Minus	***	6	=0		X42=		OR	X84=		
<u> </u>	rinoi ricoe	NIATION OF MI	JET IPLE DEI	PENDENI	CLAIM		]	+140=		OR	+280=		
							L	TOTAL			TOTAL		
			VODIT. FEE		OR	ADDIT. FEE							
_		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	, ,						
AMENDMENT B	A CONTRACTOR	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	MR.		=	] ]	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***			[	X42=		OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM .						J þ	+140=			. 200		
										OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	*	Minus	**		=	] [	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	]	X42=			X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							745		OR	A04=		
+140=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
**	If the "Highest Nu	mber Previously Pa	aid For IN THI	S SPACE &	s less tha	n 20. enter "20.	· A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
-	ii we "Highest Nu The "Highest Num	mber Previously Pai ber Previously Pai	aid For" IN THI d For" (Total o	IS SPACE i r Independe	s less tha ent) is the	n 3, enter "3." highest numbe			ropriate box				